


Please type a plus sign (+) inside this box 


Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

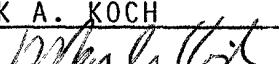
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	409p5
	First Inventor	Breauchamp
	Title	Comb Screw Driven Bit Holder
	Express Mail Label No.	

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small></li> <li><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</li> <li><input checked="" type="checkbox"/> Specification <small>(Total Pages <input style="width: 50px;" type="text" value="1"/>)</small> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> <li>- Descriptive title of the invention</li> <li>- Cross Reference to Related Applications</li> <li>- Statement Regarding Fed sponsored R &amp; D</li> <li>- Reference to sequence listing, a table, or a computer program listing appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings (if filed)</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul> </li> <li><input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <small>[ Total Sheets <input style="width: 50px;" type="text" value="1"/> ]</small></li> <li>Oath or Declaration <small>[ Total Pages <input style="width: 50px;" type="text" value="1"/> ]</small> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) <small>(for continuation/divisional with Box 17 completed)</small></li> <li><input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></li> </ol> </li> <li><input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</li> </ol>	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231  <ol style="list-style-type: none"> <li><input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</li> <li>Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ol style="list-style-type: none"> <li><input type="checkbox"/> Computer Readable Form (CRF)</li> <li>Specification Sequence Listing on:               <ol style="list-style-type: none"> <li><input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li> <li><input type="checkbox"/> paper</li> </ol> </li> <li><input type="checkbox"/> Statements verifying identity of above copies</li> </ol> </li> </ol>
--	--

<b>17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</b>	
<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-part (CIP)	of prior application No. <u>09/983,567</u> Group / Art Unit. <u>3723</u>
<small>Prior application information. Examiner _____</small>	
<small>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</small>	

<b>18. CORRESPONDENCE ADDRESS</b>					
<input type="checkbox"/> Customer Number or Bar Code Label  or <input checked="" type="checkbox"/> Correspondence address below					
Name	MARK A. KOCH				
Address	866 Main Street East				
City	Hamilton	State	ON	Zip Code	L8M 1L9
Country	Canada	Telephone	(905) 549-5880	Fax	545-2800

Name (Print/Type)	MARK A. KOCH	Registration No. (Attorney/Agent)	44,448
Signature		Date	Feb 18/02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

10/076481  
 02/19/02

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)

## Complete If Known

Application Number	
Filing Date	
First Named Inventor	Beauchamp
Examiner Name	
Group Art Unit	
Attorney Docket No.	40905

## METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:
- Deposit Account Number
- Deposit Account Name
- ☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☐ Applicant claims small entity status. See 37 CFR 1.27
2. ☒ Payment Enclosed:
- ☐ Check ☒ Credit card ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee Code	Fee Description	Fee Paid
		(S)	(S)		
101	710	201	355	Utility filing fee	310.00
106	320	208	180	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) (\$310.00)

### 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	X	
Multiple Dependent	-3** =	X	

Large Entity	Small Entity	Fee Code	Fee Code	Fee Description
		(S)	(S)	
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee Code	Fee Description	Fee Paid
		(S)	(S)		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
189	900	189	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

## SUBMITTED BY

Name (Print/Type)	M. Koch	Registration No. (Attorney/Agent)	44,448	Telephone	(905) 549-5880
Signature	<i>M. Koch</i>	Date	Feb 18/2002		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**Mark Arthur Koch**, M.Eng., P.Eng., L.L.B., Barrister & Solicitor



866 Main Street East, Hamilton, Ontario, Canada L8M 1L9 • Tel:(905) 549-5880 • Fax:(905) 545-2800

February 18, 2002

YOUR FILE NO.

OUR FILE NO. 409p5

**Courier Address:**

**Re: New Utility Patent Application**  
**2011 South Clark Place**  
**Arlington, Virginia**  
**22202 U.S.A.**

Telephone Contact: (703) 308-1202

Mailing address:

The Assistant Commissioner of Patents  
Washington, D.C.  
20231 U.S.A.

Dear Sirs:

Transmitted herewith for filing is a continuation in part patent application of:

Inventor: FERN BEAUCHAMP

For: COMBINATION SCREW DRIVER & BIT HOLDER

The following papers are enclosed:

35 sheets of specification including 18 claims

26 sheets of informal drawings including 70 drawings

An abstract

Declaration for Utility Patent

New Utility Patent Application Transmittal sheet

Fee Transmittal sheet

Self addressed return card verifying receipt of this package.

Please find enclosed form PTO-2038 Credit Card Payment in the amount of \$370.00.

Yours very truly,

Mark Arthur Koch

44,448

MAK:pf

Encl.

F:\WP\MARK\PAT\409P5US.TL1

440076454-024906